

Montana Response to Intervention/ Multi-Tiered System of Supports (RTI/MTSS) Program Administrative Signatures

By signing below you confirm having read and understood this application and agree to the participation requirements acknowledged above.

Name of School:_____ Elementary____or Middle/High School_____

CSPD Region (circle one):

I II III IV V

Typed Name of School Building Principal (required)

Signature _____ Date _____

Typed Name of Superintendent (required)

Signature _____ Date _____

Please complete this application on or before April 17, 2013 (*Deadline*)

Please fax or mail this signatory sheet on the same date that you submit the application.

Mail or fax to:

Amy Friez
Montana Office Of Public Instruction
PO Box 202501
Helena, MT 59620-2501
Fax No: